

May 11 2006 1:59PM

POSZ LAW GROUP

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P. 1

PATENT & TRADEMARK
DIVISION

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SPECIALIZING IN PATENTS, TRADEMARKS & COPYRIGHTS

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* NOT ADMITTED IN VIRGINIA
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** PATENT AGENT

FACSIMILE TRANSMISSION

Date: May 11, 2006

Pages: 4

To: **U.S. Patent Office -
Office of Finance - Refund Branch**

From: R. Eugene Varndell, Jr.

Fax No.: 571-273-6500

Subject: Request for Refund for 10/614,287

Applicant(s): MORI et al.
Application No.: 10/614,287
Filed: July 8, 2003
Title: DRIVER'S CAB FOR A WORK VEHICLE

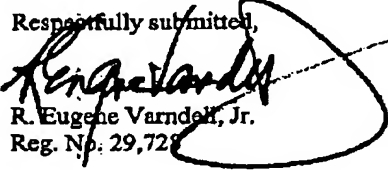
Attorney Docket No.: NX032538
Group Art Unit: 3616
Examiner: ROSENBERG, LAURA B
ALLOWED: January 3, 2006
ISSUE FEE PAID: March 30, 2006

Sirs,

Applicant respectfully requests a refund of \$120 that was erroneously submitted on December 15, 2005 when an amendment in response to the office action mailed on September 15, 2005 was filed. The referenced amendment was filed within the set three-month period for response, therefore no extension of time fee was necessary. Please see the attached copy of the fee transmittal form, copy of postcard with OIPE date stamp of December 15, 2005, and a copy of check No. 1629 for your reference.

For the foregoing reasons, it is respectfully requested that \$120 be refunded by crediting our deposit account No. 50-1147. Acknowledgement of receipt and approval of this request are respectfully requested.

Respectfully submitted,


R. Eugene Varndell, Jr.
Reg. No. 29,728

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Approved for use through 07/31/2008. OMB 0651-0052
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Effective on 12/8/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

☐ Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(S) 120	Complete if Known:
		Application Number 10/614,287
		Filing Date December 15, 2005
		First Named Inventor MORI et al.
		Examiner Name Laura B. Rosenberg
		Art Unit 3616
		Attorney Docket No. VX032538

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: **50-1147** Deposit Account Name: **Posz Law Group, PLC**

For the above identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.18 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2034.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES		FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
Application Type	Fee (\$)	Small Entity Fee (\$)	Small Entity Fee (\$)	Small Entity Fee (\$)	Small Entity Fee (\$)	Small Entity Fee (\$)		
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent **Fee (\$)** **Small Entity Fee (\$)**

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent **50** **25**

Multiple dependent claims **200** **100**

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)** **Multiple Dependent Claims** **Fee (\$)** **Fee Paid (\$)**

- 20 or HP = **0** **x** **\$50** = **\$0**

HP = highest number of total claims paid for, if greater than 20

Indep. Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

- 3 or HP = **0** **x** **\$200** = **\$0**

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$ _____ (\$ for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(C) and 37 CFR 1.16(a).

Total Sheets **Extra Sheets** **Number of each additional 50 or fraction thereof** **Fee (\$)** **Fee Paid (\$)**

- 100 = _____ / 50 = _____ (round up to a whole number) **x** _____ = **\$0**

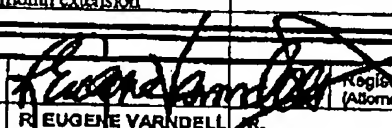
4. OTHER FEE(S)

Non-English Specification, **\$130 fee (no small entity discount)** **Fee Paid (\$)**

Other: **One month extension** **Fee Paid (\$)**

\$120

SUBMITTED BY

Signature 	Registration No. 28,728	Telephone (703) 707-9110
Name (Print/Type) EUGENE VARDEL		Date December 15, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1459, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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Receipt is hereby acknowledged in the name of MORI et al. entitled
DRIVER'S CAB FOR A WORK VEHICLE

S/N: 10/614,287

Filing Date: 7/8/03

Atty. Docket: VX032538

Please acknowledge receipt of the following by date stamping this postcard
and returning to Posz Law Group, PLC:

- Transmittal (2)
- Fee Transmittal (2)
- Petition for extension of time
- Response after Final
- a check for \$120

SUBMISSION DATE: December 15, 2005



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May 11 2006 1:59PM POSZ LAW GROUP
DATE : Dec 15/2005
E # : 1629
OUNT: \$120.00
COUNT: GENERAL - 7
ID TO: Commissioner for Patents

7037079112

P.4

032538: PTO Filing - One month Extension

IENT: KOMATSU - KOMATSU LTD.
TTER: KOMATSU

POSZ LAW GROUP, PLC
OPERATING ACCOUNT
12040 SOUTH LAKES DRIVE, STE. 307
e Hundred Twenty RESTON, VA 20191 *****

Commissioner for Patents

PAY
TO THE
ORDER
OF

VX032538: PTO Filing - One month

⑈001629⑈ ⑆056000⑆ ⑈1⑈

OSZ LAW GROUP, PLC

TE : Dec 15/2005

E # : 1629

OUNT: \$120.00

COUNT: GENERAL - 7

ID TO: Commissioner for Patents

032538: PTO Filing - One month Extension

MATSU - KOMATSU LTD.

TTER: KOMATSU

WYER: Gene Varndell

Sup 5, I.P. Dept., Research Div.

00 Manda, Hiratsuka-City

nagawa-Prefecture

4-8567

PAN

OPERATING ACCOUNT

** GENERAL BALANCES **

UNBILLED DISBS:

A/R BALANCE :

0.00

1672.00

167

** TRUST BALANCES **

TRUST BALANCE :

0.00

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Based on PTO/SB/22 (12-04)
Approved for use through 7/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) VX032538	
Application Number 10/614,287		Filed: July 8, 2003	
For DRIVER'S CAB FOR A WORK VEHICLE			
Art Unit 3616		Examiner Laura B. Rosenberg	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	Fee \$ 120.00	Small Entity Fee \$ 60.00	\$ <u>120.00</u>
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ 450.00	\$ 225.00	\$ _____
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ 1,020.00	\$ 510.00	\$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ 1,590.00	\$ 795.00	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ 2,160.00	\$ 1,080.00	\$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-1147</u> . I have enclosed a duplicate copy of this sheet.			
WARNING: Information on this form may become public. Credit card information should not be included on this form.			
I am the <input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>29,728</u>			
<input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____			
 Signature		December 15, 2005 Date	
R. Eugene Varndell, Jr. (Reg. No. 29,728) Typed or printed name		(703) 707-9110 Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input checked="" type="checkbox"/> Total of <u>one</u> forms are submitted.			

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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12/19/2005 MBEYENE1 00000044 10614287

FFC:1251

120.00 DP

Adjustment date: 06/15/2006 SDIRETA1
12/19/2005 MBEYENE1 00000044 10614287

01 FFC:1251

-120.00 DP

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Repl'n, Ref: 06/15/2006 SDIRETA1 0008352400
DAH:501147 Name/Number:10614287 \$120.00 CR
FC: 9204